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To: Board Chairperson

Ms. Jenine Dunn
Board Chairperson
Community Action Organization of Erie County, Inc.
45 Jewett Avenue
Suite 150
Buffalo, NY 14214-2442

From: Responsible HHS Official

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Ms. Ann Linehan

Acting Director, Office of Head Start

Date 12-29-17

Overview of Findings

On 11/21/2017, the Administration for Children and Families (ACF) conducted a monitoring review of the Community Action Organization of Erie County, Inc. Head Start and Early Head Start programs to determine whether the previously identified findings had been corrected. We wish to thank the governing body, Policy Council, staff, and parents of your program for their cooperation and assistance during the review. This Head Start Review Report has been issued to Ms. Jenine Dunn, Board Chairperson, as legal notice to your agency of the results of the program review.

Based on the information gathered during this review, we have closed the previously identified findings which are included in this report. For any previous findings that are not included in this report and remain open, the grantee will receive a future follow-up review to determine the compliance status of those findings.

If you have questions about this report, please contact your ACF Regional Office.

Distribution of the Head Start Review Report

Copies of this report will be distributed to the following recipients:

Ms. Carolyn Baker, Regional Program Manager

Ms. Melissa R. H. Brown, Policy Council Chairperson

Mr. L. Nathan Hare, CEO/Executive Director

Ms. Phyllis McBride, Head Start Director

Ms. Diane Semrau, Early Head Start Director

Overview Information

Review Type: Desk/FTL Solo

Organization: Community Action Organization of Erie County, Inc.

Program Type: Head Start and Early Head Start Field Lead: Ms. Vanessa Nelson-Eastmond

Funded Enrollment HS: 200 Funded Enrollment EHS: 140

Glossary

A glossary of terms has been included to explain the various terms used throughout this report.

Term	Definition		
Compliance Measure (CM)	The specific statements that collectively assess the level of program performance for each Key Indicator, focusing on one or more Federal regulations critical to the delivery of quality services and the development of strong management systems.		
Strength	A new and/or unique way of reaching the community.		
Compliant	No findings. Meets requirements of Compliance Measure.		
Concern	An area or areas of performance which need improvement or technical assistance. These items should be discussed with the Regional Office and do not include a timeframe for correction.		
Noncompliance	A finding that indicates the agency is out of compliance with Federal requirements (including, but not limited to, the Head Start Act or one or more of the performance standards) in an area or areas of program performance, but does not constitute a deficiency. Noncompliances require a written timeline of correction and possible technical assistance (TA) or guidance from their program specialist, and if not corrected within the specified timeline, can become a deficiency.		
Deficiency	An area or areas of performance in which an Early Head Start or Head Start grantee agency is not in compliance with State or Federal requirements (including but not limited to, the Head Start Act or one or more of the regulations) and which involves:		
	(A) A threat to the health, safety, or civil rights of children or staff;		
	(B) A denial to parents of the exercise of their full roles and responsibilities related to program governance;		
	(C) A failure to perform substantially the requirements related to Early Childhood Development and Health Services, Family and Community Partnerships, or Program Design and Management; or		
	(D) The misuse of Head Start grant funds.		
	(ii) The loss of legal status or financial viability, as defined in part 1305 of this title, loss of permits, debarment from receiving Federal grants or contracts or the improper use of Federal funds; or		
	(iii) Any other violation of Federal or State requirements including, but not limited to, the Head Start Act or one or more of the performance standards of this title, and which the grantee has shown an unwillingness or inability to correct within the period specified by the responsible HHS official, of which the responsible HHS official has given the grantee written notice of pursuant to section 1304.2.		

Corrected

Summary of Findings

Finding Type	Applicable Standards	Program Type	Grant	Timeframe	Status
Safe Learning Environments	$\S1302.90(c)(1)(v)$	HS and EHS	02CH10048	N/A	Corrected

Status of Previously Identified Deficiency Determinations

Finding	Status

§1302 Program Operations.

1302.90 Personnel policies.

- (c) Standards of conduct.
- (1) A program must ensure all staff, consultants, contractors, and volunteers abide by the program's standards of conduct that:
- (v) Ensure no child is left alone or unsupervised by staff, consultants, contractors, or volunteers while under their care.

Other-Offsite - 9/25/2017 - Deficiency

The grantee did not ensure no child was left alone or unsupervised by staff while under their care. On September 12, 2017, a 3-year-old child left the DiFrancesco Academy Center unattended and was unsupervised by classroom staff for approximately 15 minutes.

A review of the grantee's incident report and Program Administrator's written account of the incident found two teachers were in a classroom with six children when a child left the classroom during parent pick-up at the end of the day. A review of teachers' written statements noted one of the teachers conducted a head count at 3:45 p.m. with all six children present. The teacher realized the child was missing at approximately 3:49 p.m. and went to notify the Center Director. A parent found the child outside the center in the street and returned her to the sidewalk to a center therapist who brought the child back into the building at approximately 4:00 p.m.

In an interview, the Program Administrator stated the Child Protective Services Hotline was called the day of the incident and the Office of Children and Family Services (OCFS) began its investigation. On September 13, 2017, OCFS conducted a follow-up visit and delivered a letter of suspension that stated the license for the DiFrancesco Academy Center was suspended immediately and proposed revocation of the center's day care license. The grantee notified the parent the day of the incident and the Regional Office on September 14, 2017. A review of the OCFS Stipulation of Settlement signed on September 20, 2017 and a cashier's check for \$3,500 found the grantee met the conditions for lifting the suspension for the center.

The Program Administrator stated both teachers participated in supervision of children training on August 14, 2017. The August 14-25, 2017 Annual Training Institute agenda and sign-in sheets found staff received training in the following areas: learning environment, schedules, routines and transitions, health and safety, indoor/outdoor supervision, and accountability.

The Program Administrator reported both teachers were immediately suspended pending results of the investigation, and subsequently terminated.

The grantee did not ensure no child was left alone or unsupervised by staff while under their care; therefore, it was not in compliance with the regulation.

Desk/FTL Solo (11/21/2017) - Corrected

The grantee ensured no child was left alone or unsupervised by staff while under their care. The grantee developed and implemented a Corrective Action Plan (CAP), retrained staff, and implemented additional active supervision strategies and conducted ongoing monitoring following the September 12, 2017 incident of a child being left unsupervised.

The grantee developed a CAP with input from the Policy Council outlining strategies for improving child safety and supervision practices throughout the program. A review of Policy Council Executive meeting minutes dated September through November 2017, confirmed its members were aware of the incident, and directly involved with the development and approval of the CAP. A review of the CAP found revisions to the Supervision Plan were noted; child tracking procedures as well as staff positioning and proximity within the classroom, were modified. A review of documentation dated November 7-9, 2017, found all staff members acknowledged they read and understood the CAP. Staff meeting minutes and sign-in sheets for October 20 and November 10, 2017 confirmed staff reviewed the implementation progress of CAP activities and participated in ongoing discussion related to the supervision of children.

The grantee retrained staff to increase their understanding and ability to properly demonstrate effective child supervision practices. A review of a training agenda and sign-in sheet dated September 19, 2017, confirmed staff participation in a 3-hour child supervision training; training objectives focused on state day care regulations, maintaining child ratios, and child supervision procedures. In an interview, the Administrator and Management Team stated staff training was ongoing throughout the program year; sessions covered child supervision and safety, classroom environment, and managing challenging behaviors, and were woven into monthly and individual supervision meetings. Additionally, Center Directors and Content Area Specialists identified staff training needs based on classroom observations and teaching team discussions.

The Management Team described a number of best practices implemented to help account for children at all times. Strategies such as the installation of alarms on all exit doors, the positioning of staff at every point of egress during peak child drop-off and pick-up times, and using a child picture system during transitions to enhance face-to-name recognition, were initiated at the DiFrancesco Academy Center, and implemented program-wide.

The Administrator and Area Manager further described the grantee's newly implemented child tracking system and classroom monitoring. Within each classroom, instructional staff placed photographs of each present child on a portable board, and transported the board during each classroom transition. In addition, staff recorded the number of children within their care during each transition. In an effort to confirm each staff members' adherence to the child tracking procedures, each teacher's transition records were verified and checked for accuracy during classroom observations. The Center Director conducted classroom walk-throughs each morning; formal classroom observations and monitoring visits were completed at least twice per month. During the daily walk-throughs, the Center Director monitored the child picture board process, discussed with staff if procedures were not followed correctly, and reinforced the supervision of children policies and procedures.

A review of Monthly Classroom Checklists determined monitoring took place from September through November 2017. Areas monitored included teacher-child ratios, the use of face-to-name transition cards, actual child attendance compared to the child picture board, and determining the functionality of the center's door alarm.

The grantee ensured no child was left alone or unsupervised by staff while under their care. This area of deficiency is corrected.

— END OF REPORT —